

Recipient Committee  
Campaign Statement  
Cover Page

(Government Code Sections 84200-84216.5)

1000435

Type or print in ink.

COVER PAGE

CITY CLERK

2013 JUL 29 PM 4:10

CALIFORNIA  
FORM

460

Page 1 of 10

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

|  |   |
|--|---|
| Statement covers period<br>from 02/17/2013<br>through 03/16/2013 | Date of election if applicable:<br>(Month, Day, Year)<br>04/02/2013 |
|--|---|

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee  
☐ State Candidate Election Committee  
☐ Recall  
(Also Complete Part 5)
- ☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee  
☐ Controlled  
☐ Sponsored  
(Also Complete Part 6)
- ☐ Primarily Formed Candidate/Officeholder Committee  
(Also Complete Part 7)

2. Type of Statement:

- ☒ Preelection Statement  
☐ Semi-annual Statement  
☐ Termination Statement  
(Also file a Form 410 Termination)
- ☒ Amendment (Explain below)  
Adjusted for Nonmonetary Contributions
- ☐ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER

1355643

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

LANDREGAN FOR CLERK 2013

STREET ADDRESS (NO P.O. BOX)

2029 Verdugo Blvd. 264

CITY STATE ZIP CODE AREA CODE/PHONE

Glendale CA 91208

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

2029 Verdugo Blvd. 264

CITY STATE ZIP CODE AREA CODE/PHONE

Glendale CA 91208

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Stephanie Landregan

MAILING ADDRESS

2029 Verdugo Blvd. 264

CITY STATE ZIP CODE AREA CODE/PHONE

Glendale CA 91208

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/22/2013  
Date

Executed on 07/22/2013  
Date

Executed on  
Date

Executed on  
Date

By Stephanie Landregan  
Signature of Treasurer or Assistant Treasurer

By Stephanie Landregan  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Type or print in ink.

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

COVER PAGE - PART 2

**CALIFORNIA  
FORM 460**

Page 2 of 10

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Stephanie Landregan

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Clerk City of Glendale

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY     | STATE | ZIP   |
|---|----------|-------|-------|
| 2029 Verdugo blvd. 264                        | Glendale | CA    | 91208 |

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| COMMITTEE NAME    | I.D. NUMBER   |
|-------------------|---|
| NAME OF TREASURER | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX)   |
|-------------------|--------------------------------|
| CITY              | STATE ZIP CODE AREA CODE/PHONE |

| COMMITTEE NAME    | I.D. NUMBER   |
|-------------------|---|
| NAME OF TREASURER | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX)   |
|-------------------|--------------------------------|
| CITY              | STATE ZIP CODE AREA CODE/PHONE |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|
|----------------------|--------------|---|

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|
|-----------------------|---------------------|

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |

*Attach continuation sheets if necessary*



# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|  |   |
|--|---|
| Statement covers period<br>from 02/17/2013<br>through 03/16/2013 | CALIFORNIA<br>FORM <b>460</b><br>Page 3 of 10<br>I.D. NUMBER<br>1355643 |
|--|---|

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LANDREGAN FOR CLERK 2013

## Contributions Received

|                                 |                    | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---------------------------------|--------------------|--|--|
| 1. Monetary Contributions       | Schedule A, Line 3 | \$ 3,818.27  | \$ 3,818.27                                |
| 2. Loans Received               | Schedule B, Line 3 | 4,000.00   | 5,250.00                                   |
| 3. SUBTOTAL CASH CONTRIBUTIONS  | Add Lines 1 + 2    | \$ 7,818.27  | \$ 9,068.27                                |
| 4. Nonmonetary Contributions    | Schedule C, Line 3 | 1,738.14   | 2,061.27                                   |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4    | \$ 9,556.41  | \$ 11,129.54                               |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            |                  |             |
|----------------------------|------------------|-------------|
|                            | 1/1 through 6/30 | 7/1 to Date |
| 20. Contributions Received | \$               | \$          |
| 21. Expenditures Made      | \$               | \$          |

## Expenditures Made

|                                    |                      |             |             |
|------------------------------------|----------------------|-------------|-------------|
| 6. Payments Made                   | Schedule E, Line 4   | \$ 755.97   | \$ 715.97   |
| 7. Loans Made                      | Schedule H, Line 3   | 0.00        | 0.00        |
| 8. SUBTOTAL CASH PAYMENTS          | Add Lines 6 + 7      | \$ 755.97   | \$ 715.97   |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3   | 0.00        | 825.00      |
| 10. Nonmonetary Adjustment         | Schedule C, Line 3   | 1,738.14    | 2,061.27    |
| 11. TOTAL EXPENDITURES MADE        | Add Lines 8 + 9 + 10 | \$ 2,494.11 | \$ 3,602.24 |

## Expenditure Limit Summary for State Candidates

### 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit)

|                                |               |
|--------------------------------|---------------|
| Date of Election<br>(mm/dd/yy) | Total to Date |
| / /                            | \$            |
| / /                            | \$            |

## Current Cash Statement

|                                     |   |             |
|-------------------------------------|---|-------------|
| 12. Beginning Cash Balance          | Previous Summary Page, Line 16                | \$ 1,250.00 |
| 13. Cash Receipts                   | Column A, Line 3 above                        | 7,818.27    |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4                            | 0.00        |
| 15. Cash Payments                   | Column A, Line 8 above                        | 755.97      |
| 16. ENDING CASH BALANCE             | Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 8,312.30 |

If this is a termination statement, Line 16 must be zero.

|                              |                    |         |
|------------------------------|--------------------|---------|
| 17. LOAN GUARANTEES RECEIVED | Schedule B, Part 2 | \$ 0.00 |
|------------------------------|--------------------|---------|

## Cash Equivalents and Outstanding Debts

|                       |                                       |             |
|-----------------------|---------------------------------------|-------------|
| 18. Cash Equivalents  | See instructions on reverse           | \$ 0.00     |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | \$ 6,075.00 |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

# Schedule A Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period  
from 02/17/2013  
through 03/16/2013

CALIFORNIA  
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

LANDREGAN FOR CLERK 2013

1355643

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------------|---|--|
| 02/17/2013         | Janet Guyer<br>1306 San Luis Rey Dr.<br>Glendale, CA 91208                                      | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>Retired  | 100.00                            | 100.00  |  |
| 02/17/2013         | Mirna Stanley<br>1539 El Rito Ave.<br>Glendale, CA 91208  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>Retired  | 250.00                            | 330.00  |  |
| 02/19/2013         | Law Offices of Lore Hilburg<br>1943 Buckingham Rd<br>Los Angeles, CA 90016                      | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250.00                            | 250.00  |  |
| 02/22/2013         | Rhett Beavers<br>2028 Valantine St<br>Los Angeles, CA 90026                                     | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Architect<br>Rhett Beaver Land.<br>Architecture   | 500.00                            | 500.00  |  |
| 02/24/2013         | Sam Kaplan<br>29061 Cliffside Dr.<br>Malibu, CA 90265   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>Retired  | 100.00                            | 100.00  |  |
| <b>SUBTOTAL \$</b> |   |   |   | 1,200.00                          |   |  |

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 2,950.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 868.27
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 3,818.27

### \*Contributor Codes

IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Type or print in ink.  
 Amounts may be rounded  
 to whole dollars.

SCHEDULE A (CONT.)

|  |  |
|--|--|
| Statement covers period<br>from <u>02/17/2013</u><br>through <u>03/16/2013</u> | <b>CALIFORNIA FORM 460</b><br>Page <u>5</u> of <u>10</u> |
|--|--|

NAME OF FILER

LANDREGAN FOR CLERK 2013

I.D. NUMBER

1355643

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------------|---|--|
| 02/25/2013         | Steve Landregan<br>9553 Biscayne Blvd<br>Dallas, TX 75218                                       | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Archivist<br>Dallas Catholic Diocese  | 250.00                            | 250.00  |  |
| 02/25/2013         | Dennis Otsuji<br>12483 Rue Fountainbleau<br>San Diego, CA 92131                                 | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Architect<br>WYAC   | 250.00                            | 250.00  |  |
| 03/04/2013         | Laurie Collins<br>914 Geneva St.<br>Glendale, CA 91207  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Laurie Collins Attorney at<br>Law<br>Self-Employed  | 500.00                            | 550.00  |  |
| 03/04/2013         | Sharon Collins<br>1325 North Central Ave C<br>Glendale, CA 91202                                | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | KS Collins & Associates<br>Self-Employed  | 100.00                            | 100.00  |  |
| 03/04/2013         | Janet Peterson<br>320 East Stocker st #307 #307<br>Glendale, CA 91207                           | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>Retired  | 100.00                            | 100.00  |  |
| <b>SUBTOTAL \$</b> |   |   |   | 1,200.00                          |   |  |

**\*Contributor Codes**

IND - Individual  
 COM - Recipient Committee  
 (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

FPPC Form 460 (January/05)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Type or print in ink.  
 Amounts may be rounded  
 to whole dollars.

SCHEDULE A (CONT.)

|  |  |
|--|--|
| Statement covers period<br>from <u>02/17/2013</u><br>through <u>03/16/2013</u> | <b>CALIFORNIA FORM 460</b><br>Page <u>6</u> of <u>10</u> |
|--|--|

NAME OF FILER

LANDREGAN FOR CLERK 2013

I.D. NUMBER

1355643

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 03/10/2013         | Joy Feuer<br>2965 Edgewick Rd.<br>Glendale, CA 91206  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Artist<br>Art from the Ashes  | 100.00                      | 100.00   |                                       |
| 03/10/2013         | Adelheid Monaly<br>1843 Oakwood Ave<br>Glendale, CA 91208                                       | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>Retired  | 100.00                      | 100.00   |                                       |
| 03/10/2013         | Robert Wishnefsky<br>1852 Oakwood Ave<br>Glendale, CA 91208                                     | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Post Production<br>Paramount  | 50.00                       | 130.00   |                                       |
| 03/15/2013         | Debbie Landregan<br>812 Warren Rd.<br>Lower Gwynedd, PA 19002                                   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>Prudential Fox and Roach<br>Realtors   | 300.00                      | 300.00   |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 550.00                      |  |                                       |

**\*Contributor Codes**

IND - Individual  
 COM - Recipient Committee  
 (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

|  |  |                               |
|--|--|-------------------------------|
| Statement covers period<br>from <u>02/17/2013</u><br>through <u>03/16/2013</u> |  | CALIFORNIA<br>FORM <b>460</b> |
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|  |  | I.D. NUMBER<br><br>1355643    |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LANDREGAN FOR CLERK 2013

| FULL NAME, STREET ADDRESS AND ZIP CODE<br>OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER<br>NAME OF BUSINESS) | (a)<br>OUTSTANDING<br>BALANCE<br>BEGINNING THIS<br>PERIOD | (b)<br>AMOUNT<br>RECEIVED THIS<br>PERIOD | (c)<br>AMOUNT PAID<br>OR FORGIVEN<br>THIS PERIOD*  | (d)<br>OUTSTANDING<br>BALANCE AT<br>CLOSE OF THIS<br>PERIOD | (e)<br>INTEREST<br>PAID THIS<br>PERIOD | (f)<br>ORIGINAL<br>AMOUNT OF<br>LOAN           | (g)<br>CUMULATIVE<br>CONTRIBUTIONS<br>TO DATE        |
|---|---|---|--|--|---|--|--|--|
| Stephanie Landregan<br>2029 Verdugo blvd. 264<br>Glendale, CA 91208   |   | \$ 250.00   | \$ 0.00                                  | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 250.00<br><br>DATE DUE                                   | %<br>RATE<br>\$ 0.00                   | \$ 250.00<br><br>02/09/2013<br>DATE INCURRED   | CALENDAR YEAR<br>\$ 5,250.00<br>PER ELECTION**<br>\$ |
| † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |   |   |  |  |   |  |  |  |
| Stephanie Landregan<br>2029 Verdugo blvd. 264<br>Glendale, CA 91208   |   | \$ 1,000.00   | \$ 0.00                                  | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 1,000.00<br><br>DATE DUE                                 | %<br>RATE<br>\$ 0.00                   | \$ 1,000.00<br><br>02/09/2013<br>DATE INCURRED | CALENDAR YEAR<br>\$ 5,250.00<br>PER ELECTION**<br>\$ |
| † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |   |   |  |  |   |  |  |  |
| Stephanie Landregan<br>2029 Verdugo blvd. 264<br>Glendale, CA 91208   |   | \$ 0.00   | \$ 4,000.00                              | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 4,000.00<br><br>DATE DUE                                 | %<br>RATE<br>\$ 0.00                   | \$ 4,000.00<br><br>03/04/2013<br>DATE INCURRED | CALENDAR YEAR<br>\$ 5,250.00<br>PER ELECTION**<br>\$ |
| † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |   |   |  |  |   |  |  |  |
| <b>SUBTOTALS \$</b>   |   | 4,000.00  | \$                                       | 0.00   | \$  | 5,250.00                               | \$   | 0.00   |

## Schedule B Summary

(Enter (e) on  
Schedule E, Line 3)

- Loans received this period ..... \$ 4,000.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... NET \$ 4,000.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

# Schedule C Nonmonetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE C

|  |                            |
|--|----------------------------|
| Statement covers period<br>from 02/17/2013<br>through 03/16/2013 | <b>CALIFORNIA FORM 460</b> |
| Page 8 of 10   | I.D. NUMBER<br>1355643     |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LANDREGAN FOR CLERK 2013

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 02/20/2013    | Stephanie Landregan<br>2029 Verdugo blvd. 264<br>Glendale, CA 91208                          | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Director for the Landscape Architecture Program<br>UCLA Extension                          | COGS South Signs for Lawn Signs  | 1,453.14                  | 1,776.27  |                                    |
| 03/03/2013    | Laurie Collins<br>914 Geneva St.<br>Glendale, CA 91207                                       | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Laurie Collins<br>Attorney at Law<br>Self-Employed   | Meet and Greet Expenses          | 50.00                     | 550.00  |                                    |
| 03/04/2013    | Mirna Stanley<br>1539 El Rito Ave.<br>Glendale, CA 91208                                     | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>Retired   | Meet and Greet Expenses          | 80.00                     | 330.00  |                                    |
| 03/11/2013    | Robert Wishnefsky<br>1852 Oakwood Ave<br>Glendale, CA 91208                                  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Post Production<br>Paramount   | Meet and Greet Expenses          | 80.00                     | 130.00  |                                    |

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$** 1,663.14

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.

(Include all Schedule C subtotals.) ..... \$ 1,663.14

2. Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ 75.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL \$** 1,738.14

### \*Contributor Codes

IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



# Schedule E Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E

|  |                            |
|--|----------------------------|
| Statement covers period<br>from 02/17/2013<br>through 03/16/2013 | <b>CALIFORNIA FORM 460</b> |
| Page 9 of 10   | I.D. NUMBER<br>1355643     |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LANDREGAN FOR CLERK 2013

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| N&M Enterprises<br>1823 N. Western Ave #1<br>Los Angeles, CA 90027  | LIT     | Printing Fliers        | 665.00      |
|   |         |                        |             |
|   |         |                        |             |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 665.00

## Schedule E Summary

|  |                        |
|--|------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$ 665.00              |
| 2. Unitemized payments made this period of under \$100   | \$ 90.97               |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)                   | \$ 0.00                |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | <b>TOTAL \$</b> 755.97 |

# Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE F

|  |                               |
|--|-------------------------------|
| Statement covers period<br>from 02/17/2013<br>through 03/16/2013 | CALIFORNIA<br>FORM <b>460</b> |
| Page 10 of 10  | I.D. NUMBER<br>1355643        |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

LANDREGAN FOR CLERK 2013

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LT campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)                                      | CODE OR<br>DESCRIPTION OF PAYMENT  | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|---|------------------------------------|---|---------------------------------------|---|--|
| Stephanie Landregan<br>2029 Verdugo blvd. 264<br>Glendale, CA 91208   | FIL Candidate Filing<br>Fee        | 25.00   | 0.00                                  | 0.00  | 25.00  |
| Stephanie Landregan<br>2029 Verdugo blvd. 264<br>Glendale, CA 91208   | FIL Candidate<br>Statement Deposit | 800.00  | 0.00                                  | 0.00  | 800.00   |
|   |                                    |   |                                       |   |  |
| <b>* Payments that are contributions or independent expenditures must also be summarized on Schedule D.</b> |                                    | <b>SUBTOTALS \$</b>                                       | 825.00\$                              | 0.00\$  | 0.00\$ 825.00  |

## Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 0.00  
May be a negative number